

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		06-05-01
O.I.P.E. CLASSIFIER	W		6-15-01
FORMALITY REVIEW	T.H.	953	07-20-01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	9/5/01
2	11/8/01
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here  
**Best Available Copy**  
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 JC81  
 2/31/04